SUBMIT: <u>COMPLETED</u> APPLICATION, TAX
STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

By field Co. Zoning Dept.

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| | , and a | | |
|---------|--------------|--------|-----------|
| Refund: | Amount Paid: | Date: | Permit #: |
| | #\$0 5 kg | 5-6-15 | 15:01/5 |

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. 29236 TYPE OF PERMIT REQUESTED - | | LAND USE Owner's Name: Authorized Address of Property of Completion
* include Mon-Shoreland ☐ Shoreland donated time & material Proposed Construction Residential Use Value at Time PROJECT LOCATION 10,88 Rec'd for Issuance Municipal Use Commercial Use Proposed Use Section 1/4, BON ONER 0 \mathcal{C}^{ω} tive col D Ü □ Run a Business on (What ☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yes.--continue ☐ Is Property/Land within 300 feet of River, Stream (incl. Intermittent)

Creek or Landward side of Floodplain? If yes—continue —▶ Legal Description: (if permit being applied for is relevant to it) CHUBIR HOME XXX Relocate (existing bldg) Conversion Addition/Alteration New Construction , Township 1/4 **Project** re you app < Principal Structure Residence (i.e. cabir 4 Special Use: (explain) Mobile Home (manufactured date) Accessory Building (specify)
Accessory Building Addition/Alteration (specify) Addition/Alteration Bunkhouse w/ (☐ sanitary, or on be (Use Tax Statement) Gov't Lot ģ N, Range DS of Owner(s)) # of Stories and/or basement X 1-Story with a Porch with (2nd) Porch with Attached Garage with (2nd) Deck with Loft 2-Story Basement 1-Story + Loft No Basement cabin, hunting shack, etc. Lot(s) SANITARY (first structure on property) (specify) 15-765-4104 29230 Fid Roll 1918: (23 digits) 4605 2620 5000 1000 3000 0 24605 2620 4000 3000 0 8 Page 1 Lot(s) No. Block(s) No. Contractor Phone: Mailing Address: ならな ٤ Proposed Structure Length: Year Round Length: □ PRIVY Seasonal Town of: Use Fickack ٤ W CONDITIONAL USE X COL HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp) Superior Planet Mailing Address (included) O 29230 Eid Distance Structure is from Shoreline : 98848 or ☐ cooking & food prep facilities) Distance Structure is from Shoreline : feet bedrooms None w <u>Q</u> HASANINI SHBSQ Width: Width: Sanitary (Exists)

Privy (Pit) or Portable (w/service contract) Plowbing Municipal/City **Compost Toilet** Ray Hose Will System of No. ☐ SPECIAL USE Light Later Sanitary Sewer/Sanitary System 5 Is on the property? Volume 765 Subdivisiona What Type of Lot Size Recorded Document Specify Type: Tonk

Vaulted (min 200 gallon) Specify Type Dimensions □ B.O.A. Is Property in Floodplain Zone? \times $\times |\times| \times |\times|$ ×I × □ No Height: Height: カリカ Plumber Phone: 0,00 TS-TS-484 Telephone: Page(s) 663 OTHER Authorization Are Wetlands
Present?

Yes
No φ Footage Square 348 Water CO Well

I (we) declare that this appli am (are) responsible for the may be a result of Bayfield above described propertial

Z Z

Secretarial Staff

Other: (explain)

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES by accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) yof all information I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which this information I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the

etter(s) of authorization must accompany this application)

Conditional Use: (explain)

Moltiphe or Mich

Buildings

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Authorized Agent:

(If you are signi

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98819

Attach
Copy of Tax Statement
property send your Recorded Des

Date

6

12-3

Lego Contraction

Address to send permit

Owner(s):

(If there are

Issuance Information (County Use Only) Hold For Sanitary: Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. Granted by Variance (B.O.A.) Permit #: Permit Denied (Date): Setback to Privy (Portable, Composting)
Prior to the placement or construction of a structure within ten (10) feet of the minimum reconterprises of the prior to the prior Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Signature of Inspector: Date of Inspection: Setback to Septic Tank or Holding Tank
Setback to Drain Field Setback from the West Lot Line Setback from the East Lot Line Is Parcel in Com Setback from the **South** Lot Line Setback from the **South** Lot Line **心にいじ** Was Parcel Legally Created Was Proposed Building Site Delineated Please complete (1) - (7) above (prior to continuing) Parcel in Common Ownership
Is Structure Non-Conforming Is Parcel a Sub-Standard Lot \rakety on(s):Town, Commi E (2) (3) (5) (6) (7) below. Draw or Sketch your Property (regardless of what you are applying for) Show Location of: Show / Indicate: Show:
Show any (*):
Show any (*): Show: Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W) Show Location of (*): Setbacks: (measured to the closest point) 01/5 NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: All Municipalities Are Required To Enforce The Uniform Dwelling Code The Construction Of New One & Two Family Dwelling: All Municipalities are Required To Enforce The Uniform Dwelling Code Town, Village, City, State or Federal agencies may also require permits. Z X imitee or Board Conditions - France 5 で帯で -□ Yes Hold For TBA ×× Yes (Deed of Record) (Fused/Contiguous Lot(s)) North (N) on Plot Plan

(*) Driveway and (*) Frontage Road (Name Frontage Road)

All Existing Structures on your Property

(*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)

(*) Lake; (*) River; (*) Stream/Creek; or (*) Pond

(*) Wetlands; or (*) Slopes over 20% **Proposed Construction** ONO NO 7 SNA Permit Date: 305 Reason for Denial: Sanitary Number: 200 Inspected by: Measurement S が対が **②**へ発う Hold For Affidavit: X □ N N No. No HI No they need to be attached.)

B. / STRUCTURE ... Feet Feet Feet Feet Feet 6-15 Day Raix Meno Mitigation Required Mitigation Attached Previously Granted by Variance (B.O.A.)

Yes No Setback to Well Were Property Lines Represented by Owner
Was Property Surveyed dary line from which the setback m Elevation of Floodplain Setback from **Wetland**Setback from **20% Slope Area** Setback from the Bank or Bluff Setback from the Lake (ordinary high-water mark)
Setback from the River, Stream, Creek で生る。たち Komonial Deine Man Changes in plans must be approved by the Planning & Zoning Dept. Hold For Fees: 🗆 Description Yes 35 Affidavit Required Affidavit Attached □¥es Lakes Classification (Zoning District Date of Re-Inspection: U. Date of Approval 5.28 Measurement □Xes \propto NO S ___ **₹** ₹ Fee Feet Feet Feet Feet Fee